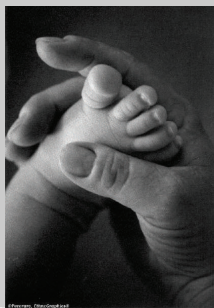


April 4, 2008



COMMONWEALTH OF KENTUCKY

FIRST STEPS
KENTUCKY'S EARLY INTERVENTION SYSTEM

Newly Awarded Autism Centers of Excellence to Further Autism Research

Source: National Institutes of Health - April 1, 2008



The National Institutes of Health (NIH) has announced the latest recipients of the Autism Centers of Excellence (ACE) program. These grants will support studies covering a broad range of autism research areas, including early brain development and functioning, social interactions in infants, rare genetic variants and mutations, associations between autism-related genes and physical traits, possible environmental risk factors and biomarkers, and a potential new medication treatment. For more information go to <http://www.nih.gov/news/health/apr2008/nimh-01.htm>.

HHS Releases National Statistics on Child Abuse and Neglect for 2006



In addition to being Autism Awareness Month, April is also Child Abuse Prevention Month. The following is an excerpt from the U.S. Department of Health and Human Services' publication *Children's Bureau Express* (April 2008, Vol. 9, No. 3).

According to data released by the U.S. Department of Health and Human Services (HHS) in *Child Maltreatment 2006*, an estimated 905,000 children were found to be victims of abuse or neglect in fiscal year (FY) 2006, represent-

ing a rate of 12.1 per 1,000 children in the population. The number and rate of victims has decreased since 2002, when there were an estimated 910,000 victims at a rate of 12.3 per 1,000 children.

Child Maltreatment 2006 is an annual report of data collected from the States' child protective services (CPS) agencies via the National Child Abuse and Neglect Data System. The report provides national and State statistics on topics that include reports of abuse and neglect,

(Continued on Page 2)

Michelle Fessler ... Come On Down

Congratulations to Michelle Fessler, Speech and Language Therapist in Northern Kentucky! Michelle was the first provider to renew her enrollment for the 2009—2010 enrollment period.

Just a reminder, current provider agreements expire on

(Continued on Page 2)



Kentucky
UNBRIDLED SPIRIT

children, fatalities, perpetrators, and services provided to children and families.

An estimated 3.3 million referrals were made to CPS agencies in 2006, involving the alleged maltreatment of approximately 6.0 million children. Agencies screened in 61.7 percent of the referrals for investigation or assessment; as a result, at least one child was found to be a victim of abuse or neglect in approximately 30 percent of those investigations or assessments. Over the past several years, the rate of all children who received an investigation or assessment has increased, from 43.8 per 1,000 children in 2002 to 47.8 in 2006.

Of the children who were abused or neglected in 2006:

- 64.2 percent experienced neglect, 16.0 percent were physically abused, 8.8 percent were sexually abused, and 6.6 percent were emotionally or psychologically maltreated.
- Children in the age group of birth to 1 year had the highest rate of victimization at 24.4 per 1,000 children of the same age group in the national population.

An estimated 1,530 children died from abuse or neglect, reflecting a rate of 2.04 deaths per 100,000 children.

In 2006, approximately 80 percent of perpetrators of child maltreatment were parents, with other relatives accounting for another 6.7 percent of perpetrators. Approximately one-fifth of victims (21.5 percent) were placed in foster care as a result of an investigation.

To download the full report on national and State statistics, visit the Children's Bureau website:

www.acf.hhs.gov/programs/cb/pubs/cm06/index.htm



June 30, 2008. First Steps providers who are renewing their provider agreement must assure that First Steps Central office receives a completed new agreement no later than June 30, 2008 in order to prevent any lapse in enrollment.

The following materials were posted to the First Steps website on April 1st:

New Form 5A: Service Provider Agreement

New Form 5B: PSC Provider Agreement



New Form 5A and 5B Instructions

New Form 6: First Steps Provider Enrollment Form

New Form 6A: First Steps Provider Enrollment Continuation Form

New Form 6 Instructions

New Form 7: Professional Development Plan for DIs

New Form 8: Electronic Media Addendum

New Form 8 Instructions

Background Check Policy (Effective July 1, 2008)

AOC-PT-49 Criminal Background Check Form

AOC-PT-49 Instructions

DPP-156 Central Registry Check Form

DPP-156 Instructions

If you have any questions regarding the enrollment renewal materials, please contact Jackie Neal at 502/564-3756 x4049 or by e-mail at Jackie.neal@ky.gov.

April 11, 2008



COMMONWEALTH OF KENTUCKY

FIRST STEPS

KENTUCKY'S EARLY INTERVENTION SYSTEM

First Steps to Rebuild Data Management and Claims Processing System

The Cabinet for Health and Family Services is announcing today that a contract has been awarded to reshape the *FIRST STEPS* program's current form-based information and billing system to a real-time, web-based data management, recordkeeping and claims processing system.

This significant investment by the CHFS demonstrates their commitment to streamline the business processes of their service providers and community partners and move toward the reality of an e-health network that will support teaming, planning, recordkeeping and billing.

"The field told us they wanted to spend less time on paperwork and billing and more time with children and families. We've heard them

and we're going to make that happen," said Kirsten Hammock, First Steps Program Administrator.

The **I**technology-assisted **O**bservation and **T**eaming **S**upport system, more affectionately called **TOTS**, is expected to be operational within one year. Check back weekly for updates on our progress.



April Recognized as Child Abuse Prevention Month

News Release

Kentucky Cabinet for Health and Family Services

Media Contacts: Anya Armes Weber, (502) 564-6180, ext. 4014; or Vikki Franklin, (502) 564-7042

Download an audio clip of Division of Protection and Permanency Assistant Director Jim Grace discussing child abuse prevention at

<http://chfs.ky.gov/NR/rdonlyres/9C33682F-5E27-4FDC-8617-077FAEB12C6B/0/childAbuseANRApr08.mp3>.

Reporting suspected child abuse or neglect is the law

FRANKFORT, Ky. (April 10, 2008) – April is Child Abuse Prevention Month, and the state agency responsible for child protective services is reminding Kentuckians that reporting suspected child abuse or neglect is the law.

The Kentucky Cabinet for Health and Family Services (CHFS) offers a state-wide, toll-free hot line – 1-800 752-6200 – that citizens can call to make a report.

Grace said many children were the focus of multiple reports.

"Rarely does abuse happen just one time," he said.

Week of the Young Child 2008: *Bring Communities Together for Children—Children Bring Communities Together*

New for Week of the Young Child 2008

Week of the Young Child is April 13-19, 2008! Tools and information for Week of the Young Child will help you plan exciting events to celebrate children and raise awareness of their needs. Check out these resources and start planning ways to *bring your community together for children!*

Check it out at: <http://www.naeyc.org/about/woyc/>



NOTICE Regarding Provider Renewals

PLEASE NOTE when preparing your provider renewal application for 2009 – 2010: All forms related to the application have been updated. It is important to download and complete the updated forms. The updated forms have revision dates of 4/08. You can find the 2009 – 2010 provider enrollment application materials on the First Steps website home page at the following link:

<http://chfs.ky.gov/dph/firststeps.htm>

Scroll down to the window entitled New Information. The first article in that window is April 2008, Provider Agreements. The revised forms to use for the current renewal contracts are located just below a few brief paragraphs of information.

Central Office has received several provider renewal applications containing the old forms. We are unable to accept and process these applications and must, unfortunately, return them to the applicant.

Central Office has been asked to remove the old forms that are currently located under the Service Provider Information page of the First Steps website. The old forms cannot be removed at this time because new applicants (not applicants renewing their enrollment) who are applying to provide services anytime before July 1, 2008, must complete the application (and all associated materials) currently in place for the 2007 – 2008 service period.

While processing provider renewal applications, we have been responding to two recurring questions that we wanted to address.

- Q.** I'm an ISC. Do I complete the PSC or the Service Provider Agreement?
- A.** ISCs should complete the PSC Provider Agreement.
- Q.** Where should the AOC-PT-49 criminal background check request form and payment be mailed to?
- A.** ADMINISTRATIVE OFFICE OF THE COURTS
PRETRIAL SERVICES RECORDS DIVISION
100 MILLCREEK PARK

Fetal Alcohol Spectrum Disorders Survey

A workgroup has come together at the state level to look at the existing capacities of various programs to address the needs of children with Fetal Alcohol Spectrum Disorders (FASD) and their families. To assist them in their work, the group has developed a short survey that will ask you some questions about your opinions and experiences with children affected by or parents dealing with FASD. Information from

this survey will be used to design trainings, materials and resources that will be distributed to you by Kentucky's Statewide FASD Workgroup in the very near future. You can access the survey at the following link:

[Click Here to take survey](https://www.surveymonkey.com/s.aspx?sm=zV7gh2bIDAu53PkWXLOcBA_3d_3d)

Child Abuse Prevention Month (Continued from page 1)

After receiving a report, DCBS staff determines if the referral meets criteria for abuse. An investigation is conducted within 24 hours on most cases, but in cases where the child may be in immediate danger, a worker will investigate within the hour. Law enforcement may also become involved to investigate whether a crime has been committed or whether children need to be removed for safety. A judge makes the final decision about a child's temporary removal through an emergency custody order.

If a family must be separated for the child's protection, DCBS tries to reunite the family under better circumstances.

"Keeping families together is our goal," Grace said. "We want children to return home to a stronger, safer family."

Grace said a social services worker will work with families to assess strengths and needs and determine what services are needed from community partners.

"We try to teach families that abuse doesn't need to be a part of their lives," Grace said. "We can help remove the barriers that prevent parents from providing for their children's well-being."

Some reports aren't accepted if they don't meet criteria to warrant an investigation.

"If there is a question about whether a particular situation is abuse or neglect, we always prefer the person make the call and talk over what has come to their attention," Grace said. "Our social service workers are experts who can help callers sort things out. They collect specific information that allows us to know whether we have the

authority to investigate a specific incident."

Grace said vital information to have when reporting abuse and neglect includes the child's name, approximate age, address, parents' names and location at the time the call is made. Specific information about why you believe the child is being abused or neglected and by whom, as well as the names and phone numbers of other people who might have information about the reported abuse or neglect, is also important.

If a child is in immediate danger, you should call 911 or local police, Grace said.

When the caller's concerns do not meet DCBS' criteria for abuse, the family may be referred to other agencies for needed resources. An example is if a child is not appropriately clothed for the season, the family may be referred to a clothing bank.

Prevent Child Abuse Kentucky (PCAK), one of the cabinet's community partners, is a statewide nonprofit agency whose mission is to prevent the abuse and neglect of Kentucky's children through its outreach.

"Abuse and neglect are associated with short- and long-term consequences that affect not only the child and family, but also society as a whole," said PCAK Executive Director Jill Seyfred. "PCAK gives parents and caregivers expert guidance on child safety. We're proud to be one of DCBS' partners in prevention."

PCAK offers a toll-free hot line -- (800) CHILDREN -- that provides information and referrals to help prevent child abuse. Visit them online at www.pcaky.org.

Learn more about the cabinet's efforts to prevent child abuse online at <http://chfs.ky.gov/dcbs/dpp/childsafety.htm>.

PCAK suggests several tips to help prevent child abuse.

Child Abuse Prevention

Strategies

— Never discipline a child when your anger is out of control.

— Never leave a child unattended, especially in a car.

— Learn the signs of physical abuse. Take note of bruises, cuts, burns or other injuries a child cannot explain.

— Teach children the difference between "good touches," "bad touches" and "confusing touches."

— When a child tells you he or she doesn't want to be with someone, this could be a red flag. Listen to the child, and believe what he or she says.

— Be aware of changes in a child's behavior or attitude, and inquire about it.

— Teach children what to do if you become separated while away from home.

— Teach children the correct names of his or her private body parts.

— Be alert for any talk that reveals premature sexual understanding.

— Pay attention when someone shows greater than normal interest in a child.

— Make certain that your child's school or day care center will release him or her only to you or someone you designate.



SE REGIONAL AAHBEI CONFERENCE

“Relationship-based Early Intervention” JULY 13–15, 2008

FEATURING:

Attention: Families, Early Interventionists, Therapists, Counselors, Teachers & Students.

The American Association of Home-Based Early Interventionists (**AAHBEI**)

is sponsoring the

SE Regional Conference

"Relationship-based Early Intervention"

July 13-15, 2008

AAHBEI has an twelve-year track record of providing quality in-service opportunities at a very reasonable price.

Pre-Session:

Marya Malinowski

Why Do We Do What We Do?

Key Note Speakers:

Ann Turnbull

Early Childhood Family Support Communities of Practice.

Kevin O'Connor

Parents and Professional Providers: Building a Partnership That has Impact and that Will Last.

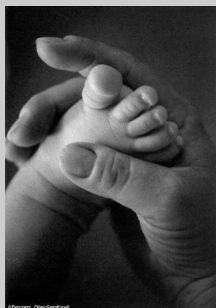
Conference outline & registration information may be found on the AAHBEI website www.aahbei.org

or you may contact: Sandra Wieber at s_wieber@bellsouth.net or 423 312 2270.

The Symposium will be held at The Lodge at Simpsonwood in Norcross, Georgia.

Registration is limited and there is a deadline for registering!

Please feel free to pass along to those who might be interested.



FIRST STEPS

KENTUCKY'S EARLY INTERVENTION SYSTEM

Last week we shared with you plans to develop a web-based data management, recordkeeping and claims processing system that will replace the current Centralized Billing and Information System (CBIS). The new system will be called **TOTS**, which stands for **T**echnology-assisted **O**bservation and **T**eaming **S**upport system. Work has been underway for several weeks now and we are getting very excited about the progress being made.

For many, the term “web-based” is perfectly clear. However, for others it may be somewhat confusing. By “web-based”, we mean that the system or application will be made available via the internet (World Wide Web). Users will access the system through Internet Explorer (a web browser).

By changing to a web-based system, service coordinators and providers will be able to add and review child-specific information online. Information that was formerly maintained in a paper file at the POE or with the PSC or with the provider (or all three), will be securely maintained in a single location online where all team members will be able to access it and review it.

Electronic management of information and records will dramatically decrease the time and resources currently spent on activities like copying, faxing and filing – allowing service coordinators and providers to spend more time working with children and families.

Check back next week for another update ...

First Steps Seeking Providers Interested in ASD

The First Steps program is seeking providers who have experience working with children with an Autism Spectrum Disorder (ASD) and their families to participate in an exciting professional development opportunity.

The First Steps program has collaborated with the Kentucky Autism Training Center to offer **free** registration to 25 First Steps providers for the upcoming Autism Institute 2008.



The Autism Institute 2008 is bringing national experts in Autism and Autism Spectrum Disorders, including Phillip Strain, Ph.D., Bobbie Vaughn, Ph.D., Terry Hancock, Ph.D., and Alacia Trent Stainbrook, Ph.D., to Louisville June 5th through June 7th for an exciting and informative three day conference.

(continued page 2)

Center on the Developing Child Colloquium Series-Webcasts Available Online

Source: Center on the Developing Child at Harvard University – April 18, 2008

The Center of the Developing Child at Harvard University recently hosted a series of lectures on the science of child development with the aim of stimulating new ways of thinking across disciplines about how knowledge can inform policy and practice. To access the Webcasts and related materials from these lectures go to <http://www.developingchild.harvard.edu/content/lectures.html>

First Steps Seeking Providers Interested in ASD *(continued from page 1)*

The intent of this collaborative effort is to begin to establish a highly qualified network of First Steps providers who can assist Individualized Family Service Plan (IFSP) teams in the development of comprehensive, coordinated intervention plans that address the unique and varied needs of young children with Autism or an Autism Spectrum Disorder.

Participants in this initial professional development opportunity will be invited to participate in additional intensive training and technical assistance opportunities through the Kentucky Autism Training Center in addition to national training and

technical assistance opportunities coordinated through First Steps Central Office.

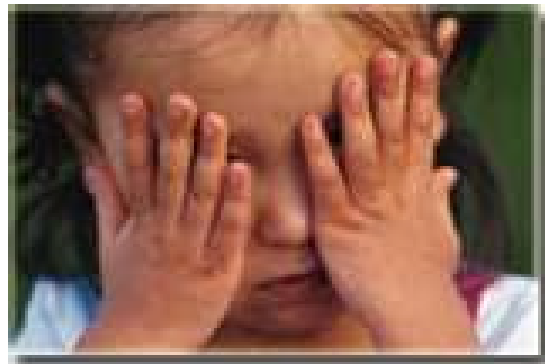
Participants must be nominated by their regional Technical Assistance Team (TAT). If you are interested in this opportunity or you know of someone who might be interested in this opportunity, please contact your regional TAT. The TAT will work with First Steps Central Office to coordinate registration. NOTE: If you are interested in this opportunity, please do not register for the Autism Institute 2008 independently. In order to receive free registration, the 25 participants must register as a group through First Steps Central Office.

Developmental Status and Early Intervention Service Needs of Maltreated Children

Source: Institute for Social and Economic Development – April 14, 2008

The Institute for Social and Economic Development (ISED) has recently published a report entitled Developmental Status and Early Intervention Service Needs of Maltreated Children, by Jan Losby, Richard P. Barth, Anita A. Scarborough, E. Christopher Lloyd, Cecilia Casanueva, and Tammy Mann.

This final report presents findings from an analysis of the National Early Intervention Longitudinal Study (NEILS) and the National Survey of Child and Adolescent Well-Being (NSCAW). It provides information about the developmental status and early intervention service needs of children under age three who are substantiated for maltreatment. It is available online at <http://aspe.hhs.gov/hsp/08/devneeds/index.htm>



Learn How to Connect with Resistant Partners Training *No Charge for Registration or Lunch!*



- WHO:** Parents and caregivers of special needs children and the professionals who work with them who would like to understand the benefits and challenges of partnering with a variety of community agencies.
- WHEN:** Friday, May 9, 2008
10 a.m. - 1 p.m.
- WHERE:** Shelby County Cooperative Extension Office
1117 Frankfort Road
Shelbyville, KY 40065
- PRESENTER:** Carol Cecil, Executive Director, of Kentucky Partnership for Families and Children will discuss why partners might be "resistant" and will share creative strategies for reaching some of these partners.

OVERVIEW

What should families and professionals do when some partners are reluctant to collaborate? How do parents and professionals reach partners that are more challenging to connect with, without straining relationships? Participants will engage in large group and small group discussions and will share their own strategies on partnering successfully.

OBJECTIVES

- * Participants will understand why some partners are "resistant" and challenging to work with.
- * Participants will learn strategies for increasing partner collaboration.
- * Participants will learn strategies for partnering successfully.

For more information or to register, please contact
Joy Varney at (502) 633-5683 or email at jvarney@sevencounties.org

Certificates of Attendance and Foster Parent Training Certificates Available
3 EILA Hours



The Arc of Kentucky 53rd Annual Conference
in collaboration with the Greater Louisville Metro Arc
and Kentucky TASH UNBRIDLED POSSIBILITIES:
Best Practices for People with Intellectual and/or
Developmental Disabilities and their Families

WHO SHOULD ATTEND?

Individuals with disabilities, family members, friends, the elderly, service providers,
community leaders, advocacy organizations, education professionals, policymakers,
etc.

CONFERENCE SITE: Executive West Hotel

830 Phillips Lane

Louisville, KY

(502) 367-2251; Toll Free: (800) 626-2708

CONFERENCE OVERVIEW:

Friday, June 6, 2008

- Two concurrent Pre-Conference Sessions
- Annual Membership Meeting
- Awards Banquet & Music by Rewind

Saturday, June 7, 2008

- Keynote Speaker - Jeff Strully, Executive Director, Jay Nolan Community Services,
Agua Dulce, California
 - Luncheon & Speakers
 - Morning and Afternoon Concurrent Breakout Sessions
- Both Days will include Exhibits and a Silent Auction.

CEUs:

The Arc of Kentucky is applying for Continuing Education Units (CEUs) for:
Social Workers, Foster Care Review Board Members, Foster Care Parents

STIPENDS: The Kentucky Council on Developmental Disabilities offers Consumer Involvement Funds to assist persons with disabilities, family members, and their guardians financial assistance to participate in conferences, etc. For an application and additional information call 1-877-367-5332 or visit their website at www.kddc.org.

Applications must be submitted to the Council by May 23, 2008. NO EXCEPTIONS.

The UnitedHealthcare Children's Foundation embraces and supports the concept of facilitating access to health-related services that have the potential to significantly enhance either the clinical condition or the quality of life of the child and that are not fully covered by the available commercial health benefit plan. These grants, up to \$5,000, can help families pay for the costs associated with medical services and equipment.

UnitedHealthcare Children's Foundation, Inc.

The Foundation was incorporated in Maryland on May 25, 1999 to improve the lives of children who need financial assistance to cover medical treatment. Since its inception, the Foundation has helped more than 800 families and provided financial assistance of over \$1 million since the first award was made in the spring of 2000. The average grant has been \$2,300 and has helped children to receive the medical care prescribed by their physicians.

How To Apply

Each applicant is required to submit a grant application. The Foundation will consider all applications. To be eligible, families must reside in the United States and be covered by a commercial health benefit plan. Each application will be evaluated based on criteria approved by the National Board of Directors.



UnitedHealthcare Children's Foundation
MN012-S286
PO Box 41
Minneapolis, MN 55440-0041
952-992-4459 (voicemail)
www.uhccf.org

How I Can Help

The UnitedHealthcare Children's Foundation is a non-profit 501(c)(3) organization and operates independently from UnitedHealthcare with its own Board of Directors. While the Foundation continues to be supported principally by UnitedHealth Group and its employees, we also need your help to meet the increasing number of requests for assistance. Your contribution will remain in the region where you reside and help defray the costs for services or items for a local family. Or you can specify that your contribution be divided equally among the regions.



Contact: Will Holman
UnitedHealthcare
(952) 992-4270
william_s_holman@uhc.com



**NEW GRANTS AVAILABLE FOR FAMILIES STRUGGLING
WITH CHILD HEALTH-RELATED EXPENSES**

UnitedHealthcare Children's Foundation accepting applicants for 2008 grant program

Families can apply for assistance grants online at www.uhccf.org

MINNEAPOLIS (April 10, 2008) – UnitedHealthcare Children's Foundation (UHCCF) announced that new grants are available to help children who need critical health care treatment, services or equipment not covered or not fully covered by their parents' health benefit plans.

UHCCF provides grants to families to help pay for child health care services such as speech therapy, physical therapy, occupational therapy sessions, prescriptions, and medical equipment such as wheelchairs, orthotics and eyeglasses.

Parents and legal guardians may apply for grants of up to \$5,000 for child medical services and equipment by completing an online application at www.uhccf.org. Tax-deductible donations can also be made online.

To be eligible for grants, children must be 16 years of age or younger. Families must meet economic guidelines, reside in the United States and be covered by a commercial health benefit plan.

"We are taking action to improve access to health care in America and are dedicated to helping more children and families this year and beyond," said Matt Peterson, UHCCF president. "We encourage families who need assistance paying for their child's medical needs to visit the UnitedHealthcare Children's Foundation Web site and apply today."

"My son Bryson was born with Down syndrome and a heart defect, which would require open heart surgery," said Jane Baker. "With the stress of knowing that our precious son was going to need major surgery, along came the worry of medical bills. Our caseworker told us about the UnitedHealthcare Children's Foundation. We were given a generous grant to help with our medical expenses. What a blessing UnitedHealthcare Children's Foundation has been for us. I am so thankful that there are people out there willing to help and give in times of need."

The foundation aims to help more children by increasing awareness of the foundation through fund-raising events, partnerships, newspaper and Web advertising, and a revamped multimedia Web site, www.uhccf.org.

About UnitedHealthcare Children's Foundation

The UnitedHealthcare Children's Foundation is a nonprofit 501(c)(3) organization that strives to enhance either the clinical condition or quality of life of children who have health care needs not fully covered by commercial health insurance. The Foundation provides grants of up to \$5,000 for costs associated with medical services and equipment. Foundation funding is provided by contributions from employees of UnitedHealth Group as well as individuals and corporations. While UHCCF receives contributions from UnitedHealth Group and its employees, individual and corporate donations to help provide assistance are deeply appreciated. To donate or learn more, please visit www.uhccf.org.

Frequently Asked Questions



What is the UnitedHealthcare Children's Foundation?

The UnitedHealthcare Children's Foundation is a non-profit 501(c)(3) organization that strives to enhance either the clinical condition or quality of life of children by providing grants of up to \$5,000 for costs associated with medical services and equipment that are not fully covered by the available commercial health benefit plan. The Foundation is funded by contributions from UnitedHealth Group, UnitedHealthcare and its employees, as well as the generosity of individuals and corporations.

What are the grants?

The grants provide financial relief for families who have children with medical needs not covered or not fully covered by their commercial health benefit plan. The Foundation aims to fill the gap between what medical services/items a child needs and what their family's commercial health benefit plan will pay for.

How does the grant work?

If a grant is approved by the Regional Board of Directors, the grant will help pay for approved medical services/items after the family's commercial health benefit plan submits payment, if any. The grant funds are not paid to the family or the child outright - families work with the Foundation on submitting invoices/bills for approved medical services/items after their commercial health benefit plan submits initial payment (if any) to the health care provider.

How does one apply for a grant?

Grant applications are available at the UnitedHealthcare Children's Foundation website – www.uhccf.org. There, a family can review the application criteria and complete an application checklist. If the family meets the Foundation's criteria and has all the items listed in the checklist, then they can begin the application process.

How do I make a contribution to the UnitedHealthcare Children's Foundation?

You can make contributions online at www.uhccf.org/contribute. You may also download a contribution form from our website and mail to:

UnitedHealthcare Children's Foundation
MN012-S286
P.O. Box 41
Minneapolis, MN 55440-0041

If I contribute where will my contribution go?

Your contribution will directly fund children's grants in the region in which you reside, unless you specify that your contribution be used nation-wide.

What percentage of my contribution will go directly to children's grants?

Thanks to the strong financial support of UnitedHealthcare and UnitedHealth Group, 99% of your contribution will go towards funding children's grants.

Is my contribution tax-deductible?

Please seek guidance from your tax preparation specialist.

April 25, 2008



COMMONWEALTH OF KENTUCKY

FIRST STEPS

KENTUCKY'S EARLY INTERVENTION SYSTEM



Technology-assisted Observation and Teaming Support system

To say that developing and implementing a new data system in less than one year is an aggressive undertaking is an understatement. We are, however, poised for the challenge.

Central Office staff have been working closely with the develop-

ment team at Yahasoft, Inc., the software engineering company contracted to design Kentucky's web-based data management and billing system (TOTS).

Yahasoft is also uniquely poised for this challenge having very recently designed the Tennessee Early Intervention Data System (TEIDS) used by the Part C Early Intervention program in Tennessee. (continued on page 2)

KEDS Updates and Deadlines

KEDS Online was updated in April, 2008 to include data entry for all assessment instruments online (AEPS, Carolina and HELP). POE's and providers should no longer be using the Excel Spreadsheets developed by KEDS for data entry.

Should you have any Excel Spreadsheets that you have not already sent to Patti Naber, instructions for uploading these spreadsheets to a secure FTP server are available in KEDS Online. After logging in, look under the Assessment tab for detailed instructions.

For those who have not already participated in online overviews to review the new assessment data entry procedures, please contact Patti Naber for upcoming dates.

Also, the KEDS Online data entry deadlines have been updated. You can find this list of dates in the Main tab after logging in.



Mandatory for Assessments for Children with Established Risk

Recommended for all other Cabinet Approved Criterion Referenced Assessments

Ongoing – Keep child demographic data current with timely submissions to CBIS.

June 30th, 2008 – First Priority: Providers Finish Assessments

Last date to complete and finalize all initial or annual assessments for children enrolled in First Steps **prior** to January 1, 2008 (finalizing is the step you take when the complete assessment has been entered online).

Second Priority:

Complete and finalize assessments for children enrolled in First Steps **after** January 1, 2008.

July 15th, 2008 – Providers Send Assessments to POE

Last date to finalize protocol, copy and send to POE office for any assessment conducted between July 1, 2006 and June 30, 2008 (again, for children enrolled as of Jan 1, 2008 first; and then more recently enrolled children second).

August 1st, 2008 – POEs Send Data to KEDS

Last date for POE office to finish data entry for any assessment conducted between July 1, 2006 and June 30, 2008 and send to KEDS.

TOTS News *(continued from page 1)*

Yahasoft's development team is wrapping up work on the design of a demonstration (test) version of TOTS. Once complete, Central Office will convene a broad based "super user" group to review the design and provide end user feedback to inform the final development process. We currently anticipate convening this group at the end of May.

Since the TOTS announcement 2 weeks ago, we have received a number of questions. Some we just can't answer yet as we're still in the infancy of the development process. Others we can. Here's a couple of early questions:

- A. Service Coordinators and POE users must use Internet Explorer. Service providers may use other web browsers. However, they must be on a Windows Operating System.
- Q. I'm a provider. How will I use TOTS?
- A. Service providers will enter

sharing and supported teaming. Service providers will enter their progress/case notes in TOTS and will bill for documented services through TOTS. In addition, separate from the child-specific functions in TOTS, service providers will be able to update their provider information (i.e. phone number, e-mail, address) and will be able to designate whether they are open or closed to referrals.



Technology-assisted Observation and Teaming Support system

- Q. Will it be possible to work in TOTS offline?
- A. No. You will need to be connected to the internet to work in TOTS. It is not possible to download a version to your computer or a laptop and upload at a later time. Users wishing to work in TOTS while in the field may want to consider purchasing a laptop with wireless internet capability and/or a wireless internet card.

evaluation information in TOTS if they are a PLE and assessment information if they are an assessor or ongoing service provider. Service providers will be able to view child/family information gathered by the service coordinator, including demographic, birth, health, RBI, family and insurance information. Service providers will have access to a child's Contact Log which will be used by service coordinators and service providers to document contacts among team members with each other or with the family for purposes of information

- Q. Do I have to use Internet Explorer?

- Q. Will I have to print and fax things to the PSC or the POE?

- A. No. The purpose of having a centralized web-based system is that everyone with appropriate access rights (i.e. IFSP team members, state staff) will be able to at least read the information in the child's record. PSCs will no longer need to print and mail the IFSP, for example. Service providers will simply log on to TOTS and view the IFSP, including the Routines Based Interview, outcomes and authorized services.

March for Babies

First Steps Central Office staff, Newborn Screening Program staff and Dr. Shepherd participated in the March of Dimes March for Babies on April 18, 2008 at the State Capitol here in Frankfort.

The "Newborn Steps" team surpassed its March for Babies fundraising goal of \$1000 by raising a total of \$1232.77. Yeah team!!

The March for Babies is a fund raising event that supports the March of Dimes' efforts to prevent birth defects, premature birth and infant mortality.

march of dimes

<http://www.marchofdimes.com/>



Most Children with Autism are on Five or More Different Treatments At Any Given Time, Kennedy Krieger Autism Registry Reveals, A Year After Launch

In April 2007, the Kennedy Krieger Institute launched the Interactive Autism Network (IAN), the nation's first autism registry. A year later, with 22,000 registrants, highlights of data collected so far reveal two trends. First, 46 percent of mothers of children with autism reported a diagnosis of depression, versus the general population where approximately 20 percent of women are faced with clinical depression in their lifetime. Secondly, most children with autism are on 5 or more different treatments at any given time, 67 percent of which are not covered by insurance. Parents report spending an average of \$500 per month on treatments.

Read more at: http://www.kennedykrieger.org/kki_news.jsp?pid=6981.

For a first year update, visit http://www.kennedykrieger.org/pdf/news/ian_anniversary.pdf.

A Note from Lisa Dorman, Family Share Administrator...

On May 3, my family and I will be leaving for China to bring home our adopted daughter EmmaLi. We are delighted our dream has become a reality at last! Therefore, I will be out of the office April 28-June 30, returning to the office July 1. During my absence, Betsy Kennedy, Financial Administrator, will be your contact. She can be reached at 502.564.3756 x4589 or at Betsy.Kennedy@ky.gov.



Listed below some things to remember:

- Continue to fax in a note stating the month Family Share should begin being billed since the child's therapeutic intervention will not begin until the month after the IFSP.
- Regarding Discharge Summary Sheets, be conscious of the date of discharge. This is an issue that causes many calls from families. Many times, children are discharged because they age out. Sometimes the child's birth date is within the first few days of a new month. Keep in mind that if no billing occurs into the new month, I do not have to bill the families. For example: If the last paid event by a therapy team member is 4/28/08, but the child's DOB is 5/1/08, be sure discharge is between 4/28/08-4/30/08. If you find you need to bill into the first few days of the next month, **remember you can submit a Temporary Suspension so billing is not assessed.**
- If you submit an IFSP Extension Request, please double check to see that your email address is complete and legible. Sometimes the details are compromised during a fax procedure.

Keep in mind, Betsy will be processing all check payments received by families as well as answering calls. There will be one billing and possibly two that will transpire without me. If you visit or communicate with your families during the time of my absence, see if they have any questions that you might help answer. Please let them know Central Office will be short-staffed for a few months and request they bear with us.

Thank you in advance for your help in these areas! Happy spring!